Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 1 of 59 United States Bankruptcy Court District of Puerto Rico, San Juan Division

| | VERIFICATION OF CREDITOR MATRI | IV. |
|------------------------------|--------------------------------|-----------|
| | Debtor(s) | - |
| CARDENALES ROLON, JORGE LUIS | | Chapter 7 |
| IN RE: | | Case No. |
| | | |

| The above named debtor(s) hereby ve | rify(ies) that the attached matrix listing creditors is true to the best of | my(our) knowledge |
|-------------------------------------|---|----------------------|
| Date: December 14, 2018 | Signature: /s/ JORGE LUIS CARDENALES ROLON JORGE LUIS CARDENALES ROLON | Debto |
| Date: | Signature: | Joint Debtor, if any |

Autoridad de Carreteras de Puerto Rico Centro Procesamiento Multas Auto Express PO Box 11889 San Juan, PR 00922-1889

Autoridad de Energia Electrica PO Box 363508 San Juan, PR 00936-3508

Banco Popular de Puerto Rico Bankruptcy Department PO Box 366818 San Juan, PR 00936-6818

Banco Santander de PR PO Box 326589 San Juan, PR 00936-2589

Banco Santander Puerto PO Box 362589 San Juan, PR 00936-2589

First Bank Consumer Services Center Bankruptcy Divi 248 PO Box 914 San Jua, PR 00908-0146

Oriental Bank PO Box 195115 San Juan, PR 00919-5115 Scotiabank de Puerto Rico PO Box 363368 San Juan, PR 00936-3368

Syncb/Car Care Pep Boy C/o PO Box 965036 Orlando, FL 32896-5036

B201B (Form 20 HB) 1 8 7 0 7 283 - BKT7

Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Document Page 4 of 59 United States Bankruptcy Court

United States Bankruptcy Court District of Puerto Rico, San Juan Division

| IN RE: | Case No |
|--|--|
| CARDENALES ROLON, JORGE LUIS Debtor(s) | Chapter 7 |
| CERTIFICATION OF NOTICE TO COUNDER § 342(b) OF THE BANK | . , |
| Certificate of [Non-Attorney] Bankru | ptcy Petition Preparer |
| I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition notice, as required by § 342(b) of the Bankruptcy Code. | on, hereby certify that I delivered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition Preparer Address: | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) |

Certificate of the Debtor

(Required by 11 U.S.C. § 110.)

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or

partner whose Social Security number is provided above.

| CARDENALES ROLON, JORGE LUIS | X /s/ JORGE LUIS CARDENALES ROLON | 12/14/2018 |
|------------------------------|------------------------------------|------------|
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X | |
| | Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 5 of 59

| Eth to date | | | | | | |
|----------------------|---|----------------------------|---------------------|---|--------------|---|
| | information to identif | | | | | |
| Debtor 1 | JORGE LUIS CAF | RDENALES ROLO Middle Name | ON | Last Name | - | |
| Debtor 2 | | | | | _ [| |
| (Spouse if, filing) | First Name | Middle Name | | Last Name | | |
| United States Bank | cruptcy Court for the: | DISTRICT OF PU | ERTO RICO | , SAN JUAN DIVISION | _ | |
| Case number | | | | | | |
| (if known) | | | | | | Check if this is an |
| | | | | | | amended filing |
| 044 1 1 = | | | | | | |
| Official For | | | | | | |
| Statement | t of Intentio | <u>n for Indiv</u> | <u>/iduals</u> | Filing Under Cha | ipter i | 12/15 |
| 16 | dead CP and the standard | | | . 16 | | |
| | dual filing under chap claims secured by you | | out this forn | n ir: | | |
| _ | d personal property a | | t expired. | | | |
| You must file this f | orm with the court wi | thin 30 days after ye | ou file your | bankruptcy petition or by the date ise. You must also send copies to | | |
| | | to a tatori anno lendo | | | 4 1 6 | an Bath dahtara masat alam |
| | the form. | in a joint case, both | i are equally | responsible for supplying correc | t informati | on. Both deptors must sign |
| Be as complete and | d accurate as possible | e. If more space is n | needed, atta | ch a separate sheet to this form. C | on the top | of any additional pages. |
| | r name and case num | | | | | or any additional pages, |
| Part 1: List You | r Creditors Who Have | Secured Claims | | | | |
| | | | Craditors W | ho Have Claims Secured by Prop | orty (Offici | al Form 106D) fill in the |
| information belo | w. | | | | • ` | ,, |
| Identify the cred | itor and the property th | nat is collateral | What do y secures a | ou intend to do with the property debt? | that | Did you claim the property as exempt on Schedule C? |
| | | | | | | • |
| Creditor's Sc | otiabank de Puerto | Rico | □ Surreno | der the property. | | □ No |
| name: | otiabank ac i acito | TRICO | | the property and redeem it. | | L 140 |
| Description of | | C14 4 | | the property and enter into a Reaffirm | nation | ■ Yes |
| | URB VEGA LINDA STREET, CAYEY, I | | Agreei | ment. the property and [explain]: | | |
| securing debt: | , , , | | | ine property and texplain]. and pay pursuant to contract | | |
| | | | | 1 7 1 | | |
| | r Unexpired Personal | | n Schedule (| G: Executory Contracts and Unex | nired Leas | es (Official Form 106G), fill in |
| the information be | low. Do not list real es | state leases. Unexpi | ired leases a | re leases that are still in effect; th ot assume it. 11 U.S.C. § 365(p)(2) | e lease pe | |
| Describe your une | expired personal prop | erty leases | | | Will | the lease be assumed? |
| Lessor's name: | | | | | | |
| Description of lease | ed | | | | | NO |
| Property: | | | | | | Yes |
| Lessor's name: | | | | | | No |
| Description of lease | ed | | | | ш | NU |
| Property: | | | | | | Yes |
| Lessor's name: | | | | | П | No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 6 of 59

| Debtor 1 CARDENALES ROLON, JORGE LUIS | Case number (if known) |
|--|---|
| | |
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indicated my intention a property that is subject to an unexpired lease. | bout any property of my estate that secures a debt and any personal |
| X /s/ JORGE LUIS CARDENALES ROLON | x |
| JORGE LUIS CARDENALES ROLON Signature of Debtor 1 | Signature of Debtor 2 |
| Date | Date |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 7 of 59

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| DISTRICT OF PUERTO RICO, SAN JUAN DIVISION | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|--|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | JORGE First name | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | CARDENALES ROLON Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8157 | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 8 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|----|--|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | |
| 5. | Where you live | URB VEGA LINDA C14 4 STREET | If Debtor 2 lives at a different address: | | |
| | | CAYEY, PR 00736 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Cayey County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. 17 URB VEGA LINDA CAYEY, PR 00736-9666 Number, P.O. Box, Street, City, State & ZIP Code | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 9 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

Case number (if known)

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
|-----|--|---|--|--|-----------------------------------|---|--|--|
| | choosing to file under | ■ Cha | | | | | | |
| | | | apter 11 | | | | | |
| | | | apter 12 | | | | | |
| | | | apter 13 | | | | | |
| | | | | | | | | |
| 8. | How you will pay the fee | — П | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | |
| | | | | | | , sign and attach the Application for Individuals to Pay The | | |
| | | | • | nstallments (Official t my fee be waive | , | only if you are filing for Chapter 7. By law, a judge may, but is | | |
| | | n y | not required to our family size | o, waive your fee, a ze and you are una | and may do so only if your incom- | e is less than 150% of the official poverty line that applies to). If you choose this option, you must fill out the <i>Application</i> | | |
| 9. | Have you filed for | ■ No. | | | | | | |
| | bankruptcy within the last 8 years? | ☐ Yes. | | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy cases | ■ No | | | | | | |
| | pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your | ■ No. | Go to I | ine 12. | | | | |
| | residence? | ☐ Yes. | Has yo | ur landlord obtain | ed an eviction judgment agains | t you? | | |
| | | , , | | No. Go to line 12 | | | | |
| | | | | Yes. Fill out <i>Initia</i> | | adgment Against You (Form 101A) and file it as part of this | | |

Debtor 1 CARDENALES ROLON, JORGE LUIS

Page 10 of 59 Case number (if known)

| Par | Report About Any Bu | sinesses \ | ou Own | as a Sole Proprietor | | | |
|-----|---|------------------------|--|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | | | | | | |
| | | ☐ Yes. | Name | e and location of busine | ess | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | Numb | per, Street, City, State | & ZIP Code | | |
| | to this petition. | | | | o describe your business: | | |
| | | | | | ss (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | • | state (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | • | ned in 11 U.S.C. § 101(53A)) | | |
| | | | | , | as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am r | not filing under Chapte | r 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | s debtor, see 11 | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | |
| | | ☐ Yes. | I am f | iling under Chapter 11 | and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | Report if You Own or | Have Any | Hazardo | us Property or Any P | roperty That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable | | What is | the hazard? | | | |
| | hazard to public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | | | |
| | | | | N | Number, Street, City, State & Zip Code | | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 11 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Page 12 of 59 **Document**

Debtor 1 CARDENALES ROLON, JORGE LUIS

Case number (if known)

| Par | 6: Answer These Questi | ons for Re | porting Purposes | | | |
|-----|--|--------------------|---|---|------------------------|---|
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consindividual primarily for a personal | | | l in 11 U.S.C.§ 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16b. | Are your debts primarily busing for a business or investment or the | | | |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you owe t | that are not consumer o | debts or business deb | ots |
| | | | | | | |
| 17. | Are you filing under Chapter 7? | ☐ No. | I am not filing under Chapter 7. | Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do y paid that funds will be available to | | | s excluded and administrative expenses are |
| | administrative expenses are paid that funds will be | | No | | | |
| | available for distribution to unsecured creditors? | | Yes | | | |
| 18. | • | 1 -49 | | 1 ,000-5,000 | | 1 25,001-50,000 |
| | you estimate that you owe? | □ 50-99 | | ☐ 5001-10,000 ☐ 10,001-25,000 | | ☐ 50,001-100,000 |
| | | ☐ 100-1 ☐ 200-9 | | 1 0,001-25,000 | | ☐ More than100,000 |
| 40 | Harris de la constant | | | | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$ | 50,000 01 - \$100,000 | □ \$1,000,001 - \$ □ \$10,000,001 - \$ | | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion |
| | be worth? | | 001 - \$500,000 | □ \$50,000,001 - 1 | | □ \$10,000,000,001 - \$10 billion |
| | | | 001 - \$1 million | \$100,000,001 | - \$500 million | ☐ More than \$50 billion |
| 20. | How much do you | □ \$0 - \$ | 50,000 | □ \$1,000,001 - \$ | 10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | | 001 - \$100,000 | <u> </u> | | ☐ \$1,000,000,001 - \$10 billion |
| | | | 001 - \$500,000 | □ \$50,000,001 - : | | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| | | □ \$500, | 001 - \$1 million | \$100,000,001 | - \$500 million | iviore than \$50 billion |
| Par | :7: Sign Below | | | | | |
| For | you | I have ex | amined this petition, and I declare | under penalty of perjury | y that the information | provided is true and correct. |
| | | | chosen to file under Chapter 7, I a ode. I understand the relief availab | | | der Chapter 7, 11,12, or 13 of title 11, United eed under Chapter 7. |
| | | | rney represents me and I did not p ained and read the notice required | | | ttorney to help me fill out this document, I |
| | | I request | relief in accordance with the cha | pter of title 11, United | States Code, specific | ed in this petition. |
| | | case can | | imprisonment for up to | | perty by fraud in connection with a bankruptcy U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | JORGE | E LUIS CARDENALES ROLC e of Debtor 1 | | Signature of Debtor 2 | |
| | | Executed | | E | Executed on | |
| | | | MM / DD / YYYY | | MM / | DD / YYYY |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 13 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Roberto Figueroa-Carrasquillo | Date | December 14, 2018 | |
|--|---------------|-------------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Roberto Figueroa-Carrasquillo | | | |
| Printed name | | | |
| RFigueroa Carrasquillo Law Office PSC | | | |
| Firm name | | | |
| | | | |
| PO Box 186 | | | |
| Caguas, PR 00726-0186 | | | |
| Number, Street, City, State & ZIP Code | | | |
| | | | |
| Contact phone (787) 744-7699 | Email address | rfc@rfclawpr.com | |
| USDC 203614 | | | |
| Bar number & State | | | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Page 14 of 59 Document Fill in this information to identify your case and this filing: Debtor 1 JORGE LUIS CARDENALES ROLON Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? 1.1 What is the property? Check all that apply Single-family home Do not deduct secured claims or exemptions. Put **URB VEGA LINDA C14 4 STREET** the amount of any secured claims on Schedule D: Duplex or multi-unit building П Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative П Manufactured or mobile home Current value of the Current value of the **CAYEY** PR 00736 Land entire property? portion you own? State ZIP Code Investment property \$103,000.00 \$103,000.00 Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee Simple Debtor 1 only Debtor 2 only County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Debtor owns a real property, located at Urb Vega Linda C14 4 Street Cayey Puerto Rico; this property consists of the 3 bedrooms, 1 1/2 bathrooms, living room, dining room, kitchen and carpot/garage.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......

\$103,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Document Page 15 of 59
Case number (if known)

| 5 | | | | |
|------------|--|--|---|--|
| | | | | |
| /lake: | Volkswagen | Who has an interest in the property? Check one | | claims or exemptions. Put |
| lodel: | New Beetle | ■ Debtor 1 only | | red claims on Schedule D: laims Secured by Property. |
| ear: | 1998 | Debtor 2 only | | , , , |
| | | | Current value of the entire property? | Current value of the portion you own? |
| | <u> </u> | | cimio property : | por non-you onner |
| IN no | 3VWBB61C8WM026475 | - 7 k loads one of the dobters and another | | |
| | | ☐ Check if this is community property (see instructions) | \$900.00 | \$900.00 |
| fake: | Jeep | Who has an interest in the property? Check one | | claims or exemptions. Put |
| lodel: | Wrangler 4WD | <u> </u> | | |
| ear: | | | | |
| | | | | Current value of the portion you own? |
| | | _ | , | . , |
| 'IN no | 1J4BA3H12AL195419 | | | |
| | | ☐ Check if this is community property (see instructions) | \$11,599.00 | \$11,599.00 |
| /lake: | Mitsubishi | Who has an interest in the property? Check one | | claims or exemptions. Put |
| lodel: | Endeavor 2WD | Debtor 1 only | | laims Secured by Property. |
| 'ear: | 2005 | Debtor 2 only | Current value of the | Current value of the |
| pproxim | nate mileage: | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| Other info | ormation: | ☐ At least one of the debtors and another | | |
| 'IN no | 4A4MM31S25E041868 | ☐ Check if this is community property (see instructions) | \$3,701.00 | \$3,701.00 |
| fake: | Volkswagen | Who has an interest in the property? Check one | | claims or exemptions. Put |
| lodel: | Beetle | ■ Debtor 1 only | | laims Secured by Property. |
| 'ear: | 1972 | | Current value of the | Current value of the |
| pproxim | nate mileage: | | entire property? | portion you own? |
| Other info | ormation: | ☐ At least one of the debtors and another | | |
| 'IN no | AE910665 | Check if this is community property (see instructions) | \$600.00 | \$600.00 |
| | ake: odel: ear: opproxin ther inf IN no ake: odel: ear: pproxin ther inf iN no ake: odel: ear: pproxin ther inf ther inf | wrangler 4WD 2010 poroximate mileage: ther information: IN no 1J4BA3H12AL195419 ake: Mitsubishi Endeavor 2WD 2005 poroximate mileage: ther information: IN no 4A4MM31S25E041868 ake: Volkswagen Beetle | ther information: N no 3VWBB61C8WM026475 | Debtor 1 and Debtor 2 only |

Official Form 106A/B Schedule A/B: Property page 2

Document Page 16 of 59 Case number (if known) **CARDENALES ROLON, JORGE L** Debtor 1 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Misc Household Goods and Furnishings \$3,400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$300.00 Three TV Sets (\$75; 75; 150) 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$700.00 Clothing and personal effects 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Jewelry \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$100.00 Two (2) Chihuahuas 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$4,700.00

Part 4: Describe Your Financial Assets

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Page 17 of 59

Case number (if known)

CARDENALES ROLON, JORGE LUIS

Document Debtor 1

| D | o you own or have any leg | pal or equitable interest in a | any c | of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|----|--|--------------------------------------|---------|--|---|
| 16 | ■ No | ve in your wallet, in your home | | a safe deposit box, and on hand when you file your petition | |
| 17 | institutions. If | | | certificates of deposit; shares in credit unions, brokerage houses, the same institution, list each. | and other similar |
| | □ No | | | Institution name: | |
| | Yes | | | Banco Popular de Puerto Rico | |
| | | 17.1. Savings Accoun | nt | Account no x9376 Savings Account | \$0.66 |
| 18 | . Bonds, mutual funds, or | | | | |
| | Examples: Bond funds, in | ivestment accounts with broke | erage | e firms, money market accounts | |
| | Yes | Institution or issuer r | name | 9: | |
| 19 | . Non-publicly traded stoo joint venture | k and interests in incorpor | rated | and unincorporated businesses, including an interest in ar | 1 LLC, partnership, and |
| | ■ No | | | | |
| | ☐ Yes. Give specific infor | mation about them Name of entity: | | % of ownership: | |
| 20 | Negotiable instruments in Non-negotiable instrumen | clude personal checks, cashi | iers' d | and non-negotiable instruments checks, promissory notes, and money orders. a someone by signing or delivering them. | |
| | ■ No□ Yes. Give specific inform | nation about them | | | |
| | Tes. Give specific inform | Issuer name: | | | |
| 21 | . Retirement or pension a Examples: Interests in IR | | 03(b) | , thrift savings accounts, or other pension or profit-sharing plans | S |
| | ■ No | | | | |
| | ☐ Yes. List each account s | separately. Type of account: | | Institution name: | |
| 22 | | deposits you have made so th | | u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or o | others |
| | ☐ Yes | | | Institution name or individual: | |
| 23 | , | a periodic payment of money | to yo | u, either for life or for a number of years) | |
| | ■ No □ Yes Issu | uer name and description. | | | |
| 24 | | | alifie | d ABLE program, or under a qualified state tuition program | |
| | ■ No | .,, | Sen | arately file the records of any interests.11 U.S.C. § 521(c): | |
| 25 | | · | | han anything listed in line 1), and rights or powers exercisa | ble for your benefit |
| 20 | No | re interests in property (ou | iici li | man anything nated in line 1), and rights of powers exercise | bie for your beliefit |
| | ☐ Yes. Give specific infor | mation about them | | | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 18 of 59 Case number (if known)

| 26. | Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No | |
|-----|---|---|
| | ☐ Yes. Give specific information about them | |
| 27. | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No | |
| | ☐ Yes. Give specific information about them | |
| M | oney or property owed to you? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you ■ No | |
| | ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years | |
| | Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settl No ☐ Yes. Give specific information | ement |
| | | |
| 30. | Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, unpaid loans you made to someone else No | Social Security benefits; |
| | ☐ Yes. Give specific information | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No | |
| | ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prop died. No | perty because someone has |
| | ☐ Yes. Give specific information | |
| 33. | Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue | |
| | ■ No □ Yes. Describe each claim | |
| 34. | Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set o | off claims |
| | Yes. Describe each claim | |
| | Any financial assets you did not already list ■ No | |
| | ☐ Yes. Give specific information | |
| 36 | . Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | \$0.66 |

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 19 of 59

| | CARDENALES ROLON, SORGE EGIS | | | |
|--------------|---|------------------------|------------------------------|--------------|
| 87. C | o you own or have any legal or equitable interest in any business-related | d property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| | | | | |
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | t in. | |
| 16. I | Do you own or have any legal or equitable interest in any farm- o | r commercial fishing | -related property? | |
| | ■ No. Go to Part 7. | | | |
| | ☐ Yes. Go to line 47. | | | |
| | | | | |
| Part | 7: Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that | number here | | \$0.00 |
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$103,000.00 |
| 56. | Part 2: Total vehicles, line 5 | \$16,800.00 | _ | |
| 57. | Part 3: Total personal and household items, line 15 | \$4,700.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$0.66 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$21,500.66 | Copy personal property total | \$21,500.66 |
| | | | | |

\$124,500.66

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

| Fill in th | nis information to identif | y your case: | ags 28-91-32 | | |
|------------------------|----------------------------|--------------------|-------------------------|---|-----------|
| Debtor 1 | JORGE LUIS CA | RDENALES ROLON | | | |
| | First Name | Middle Name | Last Name |) | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF PUERTO | RICO, SAN JUAN DIVISION | | |
| Case number (if known) | | | | | ☐ Check i |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

| 1. | Which set of exemp | otions are vo | u claiming? | ? Check one only | , even if v | our spouse is filin | g with | vou. |
|----|--------------------|---------------|-------------|------------------|---------------|---------------------|--------|------|
| | | | | | | | | |

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| URB VEGA LINDA C14 4 STREET | \$103,000.00 | | \$13,711.00 | 11 USC § 522(d)(1) |
| CAYEY PR, 00736 Line from Schedule A/B. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Volkswagen New Beetle | \$900.00 | | \$900.00 | 11 USC § 522(d)(5) |
| 1998 Line from Schedule A/B 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Jeep Wrangler 4WD | \$11,599.00 | | \$11,599.00 | 11 USC § 522(d)(5) |
| 2010 Line from Schedule A/B 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Mitsubishi Endeavor 2WD | \$3,701.00 | | \$3,701.00 | 11 USC § 522(d)(2) |
| 2005 Line from Schedule A/B 3.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| Volkswagen Beetle | \$600.00 | | \$350.00 | 11 USC § 522(d)(5) |
| 1972 Line from Schedule A/B: 3.4 | | | 100% of fair market value, up to any applicable statutory limit | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 21 of 59

| | rief description of the property and line on chedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|---|---|--------------------------------------|--------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | olkswagen Beetle | \$600.00 | | \$250.00 | 11 USC § 522(d)(5) |
| 1 | 972 ine from <i>Schedule A/B</i> : 3.4 | | | 100% of fair market value, up to any applicable statutory limit | |
| | fisc Household Goods and furnishings | \$3,400.00 | | \$3,400.00 | 11 USC § 522(d)(3) |
| | ine from Schedule A/B 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Three TV Sets (\$75; 75; 150) | \$300.00 | | \$300.00 | 11 USC § 522(d)(3) |
| _ | ine non seriedale ALL 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Clothing and personal effects | \$700.00 | | \$700.00 | 11 USC § 522(d)(3) |
| _ | THE HOLL GENERAL FILL | | | 100% of fair market value, up to any applicable statutory limit | |
| | ewelry ine from Schedule A/B 12.1 | \$200.00 | | \$200.00 | 11 USC § 522(d)(4) |
| _ | TE HOIT GENERALE FALL | | | 100% of fair market value, up to any applicable statutory limit | |
| | wo (2) Chihuahuas ine from Schedule A/B 13.1 | \$100.00 | | \$100.00 | 11 USC § 522(d)(3) |
| _ | ine non esticate 702 1611 | | | 100% of fair market value, up to any applicable statutory limit | |
| | are you claiming a homestead exemption of Subject to adjustment on 4/01/19 and every 3 ■ No | | | on or after the date of adjustment.) | |
| | Yes. Did you acquire the property covered No | d by the exemption withir | า 1,21 | 5 days before you filed this case? | |
| | ☐ Yes | | | | |

| | | | Document P | age 22 | of 59 | _ | |
|-------------|-----------------------------------|-------------------------|--|--------------|---|---------------------|-------------------------------|
| | Fill in this inf | formation to iden | tify your case: | | | | |
| Debtor | r 1 | IORGE LUIS C | ARDENALES ROLON | | | | |
| D O D (O) | | rirst Name | | ast Name | | | |
| Debtor | _ | | | | | | |
| (Spouse | if, filing) F | First Name | Middle Name L | ast Name | | | |
| United | States Bankru | ptcy Court for the: | DISTRICT OF PUERTO RICO, SA | AN JUAN D | IVISION | | |
| | | | | | | | |
| Case r | number | | | | | ☐ Chool | r if this is an |
| (III KITOWI | •/ | | | | | _ | t if this is an ded filing |
| | | | | | | | aca ming |
| Offici | ial Form 1 | 06D | | | | | |
| Sch | edule D: | Creditors | Who Have Claims Se | ecure | d by Property | / | 12/15 |
| | | | | | | | |
| | | | f two married people are filing together, b , number the entries, and attach it to this | | | | |
| known). | • • | 3., | , | | , | ,, | , |
| 1. Do an | ny creditors have | e claims secured by | your property? | | | | |
| | No. Check this | box and submit th | is form to the court with your other sche | dules. You | have nothing else to rep | ort on this form. | |
| | Yes. Fill in all o | of the information b | elow. | | | | |
| Part 1 | list All So | cured Claims | | | | | |
| | | | nore than one accurred claim list the gradite | r concretely | Column A | Column B | Column C |
| | | | nore than one secured claim, list the creditor a particular claim, list the other creditors in | | Amount of claim | Value of collateral | Unsecured |
| much a | s possible, list the | e claims in alphabetion | cal order according to the creditor 's name. | | Do not deduct the | that supports this | portion |
| <u> </u> | Scotiabank d | le Puerto | | | value of collateral. | claim | If any |
| 1211 | Rico | .0 1 40110 | Describe the property that secures the | claim: | \$89,289.00 | \$103,000.00 | \$0.00 |
| С | reditor's Name | | URB VEGA LINDA C14 4 STR | EET, | | | |
| | | | CAYEY, PR 00736 | | | | |
| | | | Debtor owns a real property, | | | | |
| | | | located at Urb Vega Linda C14 | | | | |
| | | | Street Cayey Puerto Rico; this | • | | | |
| | | | property consists of the 3 bedrooms, 1 1/2 bathrooms, li | vina | | | |
| | | | room, dining room, kitchen an | | | | |
| | | | carpot/ga | | | | |
| _ | 30 D | | As of the date you file, the claim is: Che | ck all that | | | |
| | PO Box 3633 | 668 R 00936-3368 | apply. | | | | |
| _ | | | Contingent | | | | |
| N | lumber, Street, City | , State & Zip Code | ☐ Unliquidated | | | | |
| Who | wes the debt? | Check one | Disputed Nature of lien. Check all that apply. | | | | |
| _ | | Crieck orie. | | ***** | | | |
| | otor 1 only | | An agreement you made (such as mor car loan) | tgage or sec | urea | | |
| | otor 2 only | | | | | | |
| | otor 1 and Debtor | , | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | | | |
| | | ebtors and another | ☐ Judgment lien from a lawsuit | | | | |
| | eck if this claim mmunity debt | relates to a | Other (including a right to offset) | | | | |
| Date de | ebt was incurred | 2016-07-15 | Last 4 digits of account number | 4920 | | | |
| | | | | | | | |
| A -1 1 12 | a dallar di d | | A dbis Market at | | \$00.000 | 00 | |
| | | • | umn A on this page. Write that number he edollar value totals from all pages. | ere: | \$89,289. | 00 | |
| | page (| , - a iii, aaa iii | raine retail it offi all pages. | | MAA AAA | 00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$89,289.00

Write that number here:

| | | Dog | | | |
|--|--|--|---|--|---|
| Fill in | this information to identify you | ur case: | | | |
| Debtor 1 | JORGE LUIS CAF | RDENALES ROL | ON | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, f | filing) First Name | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | DISTRICT OF PU | JERTO RICO, SAN JUAN | DIVISION | |
| Case nur | mher | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| ⊃tt:-:- | Farman 400F/F | | | | |
| | Form 106E/F | Usa Hayra His | a a a uma al Clatina | | 40/45 |
| | lule E/F: Creditors W | | | No. 4 O. C | 12/15 RIORITY claims. List the other party to |
| Schedule (): Credito he Contin | G: Executory Contracts and Unexp | ired Leases (Official I roperty. If more space ve no information to I | Form 106G). Do not include a e is needed, copy the Part yo | any creditors with partially sec ou need, fill it out, number the e | perty (Official Form 106A/B) and on ured claims that are listed in Schedule entries in the boxes on the left. Attach tional pages, write your name and |
| | ny creditors have priority unsecure | | ? | | |
| | o. Go to Part 2. | u ciaiilis agailist you | r | | |
| NI. | 0. G0 10 Part 2. | | | | |
| | | | | | |
| □Ye | | Y Unsecured Claim | าร | | |
| ☐ Ye Part 2: | List All of Your NONPRIORITY | | | | |
| ☐ Ye Part 2: 3. Do ar | List All of Your NONPRIORIT | cured claims against | you? | odulas. | |
| ☐ Ye Part 2: 3. Do ar | List All of Your NONPRIORITY ny creditors have nonpriority unsect o. You have nothing to report in this part | cured claims against | you? | edules. | |
| ☐ Ye Part 2: 3. Do ar | List All of Your NONPRIORITY ny creditors have nonpriority unsect o. You have nothing to report in this part | cured claims against | you? | edules. | |
| Part 2: 3. Do an No Ye 4. List a unsec than c | List All of Your NONPRIORITY ny creditors have nonpriority unsect o. You have nothing to report in this pages. all of your nonpriority unsecured claim, list the creditor separately | cured claims against art. Submit this form to aims in the alphabetion of or each claim. For each | you? the court with your other sche cal order of the creditor who ach claim listed, identify what t | holds each claim. If a creditor ype of claim it is. Do not list claim | |
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| Part 2: 3. Do an Ye 4. List a unsecthan of 2. | List All of Your NONPRIORITY ny creditors have nonpriority unsect to. You have nothing to report in this pages. All of your nonpriority unsecured classed claim, list the creditor separately one creditor holds a particular claim, list Autoridad de Carreteras de Rico Nonpriority Creditor's Name Centro Procesamiento Multi Express PO Box 11889 San Juan, PR 00922-1889 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and and Check if this claim is for a comr | art. Submit this form to aims in the alphabetic of for each claim. For each cl | you? o the court with your other sche cal order of the creditor who ach claim listed, identify what t in Part 3.If you have more than 4 digits of account number in was the debt incurred? of the date you file, the claim contingent inliquidated disputed of NONPRIORITY unsecured tudent loans | holds each claim. If a creditor ype of claim it is. Do not list claim three nonpriority unsecured clair 7051 is: Check all that apply | as already included in Part 1. If more ms fill out the Continuation Page of Part Total claim \$51.00 |
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Debtor 1 CARDENALES ROLON, JORGE LUIS Page 24 of 59 Case number (f know)

| 4.2 | Autoridad de Energia Electrica | Last 4 digits of account number 1000 | \$780.53 |
|-----|---|---|------------|
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | PO Box 363508 | when was the debt incurred? | |
| | San Juan, PR 00936-3508 | | |
| | Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify | |
| 4.3 | Banco Popular de Puerto Rico | Last 4 digits of account number 6849 | \$8,268.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 2007-07 | |
| | Bankruptcy Department PO Box 366818 | When was the debt incurred: | |
| | San Juan, PR 00936-6818 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.4 | Banco Popular de Puerto Rico | Last 4 digits of account number 9818 | \$3,230.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 2005-05 | |
| | Bankruptcy Department PO Box 366818 | When was the debt incurred? 2005-05 | |
| | San Juan, PR 00936-6818 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| | | | |

Debtor 1 CARDENALES ROLON, JORGE LUIS Page 25 of 59
Case number (f know)

| 4.5 | Banco Santander de PR | Last 4 digits of account number | 3875 | \$14,538.00 |
|-----|--|---|--|-------------|
| | Nonpriority Creditor's Name | When was the debt incurred? | 2017-01-27 | |
| | PO Box 326589 | | 2017 01 27 | |
| | San Juan, PR 00936-2589 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | Пол | | |
| | Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | _ ' | | |
| | At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim: | |
| | | ☐ Student loans | a oldiiii. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | nation agreement of divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.6 | Banco Santander Puerto | Last 4 digits of account number | 2035 | \$7,212.00 |
| | Nonpriority Creditor's Name | - When we also debt in some do | 004.0.00 | <u> </u> |
| | PO Box 362589 | When was the debt incurred? | 2016-09 | |
| | San Juan, PR 00936-2589 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| 4.7 | First Bank | Last 4 digits of account number | 4353 | \$7,952.00 |
| | Nonpriority Creditor's Name Consumer Services Center Bankruptcy Divi | When was the debt incurred? | 2016-08-20 | |
| | 248 PO Box 914 | | | |
| | San Jua, PR 00908-0146 Number Street City State Zlp Code | As of the date you file, the claim i | a. Chaele all that apply | |
| | Who incurred the debt? Check one. | As of the date you file, the claim i | s: Cneck all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | | <u> </u> | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | 1 claim: | |
| | | Student loans | . C. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | and the second of the second o | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |
| | | | | |

|--|

| 4.8 | Oriental Ba | | Last 4 digits of account number | 0001 | | _ | | \$24,999.00 |
|--|---|---|---|--------------------|--------------------------|--|-----------------------------------|--------------------------|
| | Nonpriority Cred | ditor's Name | When was the debt incurred? | 2016 | -05-12 | | | |
| | Number Street | PR 00919-5115 City State Zlp Code | As of the date you file, the claim | | | pply | _ | |
| | _ | the debt? Check one. | _ | | | | | |
| | Debtor 1 onl | • | Contingent | | | | | |
| | Debtor 2 onl | • | ☐ Unliquidated | | | | | |
| | Debtor 1 and | • | Disputed | | | | | |
| | _ | of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | ı cıaım: | | | | |
| | debt | s claim is for a community | ☐ Obligations arising out of a sepa | ration ag | reement o | or divorce that you did no | ot | |
| | _ | bject to offset? | report as priority claims | | | | | |
| | ■ No □ Yes | | Debts to pension or profit-sharin | | | | | |
| | Li res | | Other. Specify | | | | | |
| 4.9 | | Care Pep Boy | Last 4 digits of account number | 3356 | | _ | | \$644.00 |
| | Nonpriority Cred C/o PO Box 965 | | When was the debt incurred? | 2001 | -07 | | | |
| | | L 32896-5036 City State Zlp Code | As of the date you file, the claim | e. Chack | all that a | nnly | | |
| | | the debt? Check one. | As of the date you me, the claim | 3. Onco | an that a | ppiy | | |
| | Debtor 1 onl | ly | ☐ Contingent | | | | | |
| | Debtor 2 onl | lv | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and | • | Disputed | | | | | |
| | ☐ At least one | of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if thi | s claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim su | bject to offset? | Obligations arising out of a separeport as priority claims | ration ag | reement o | or divorce that you did no | ot | |
| | ■ No | | Debts to pension or profit-sharing | g plans, | and other | similar debts | | |
| | ☐ Yes | | Other. Specify | | | | | |
| Part 3: | List Others | s to Be Notified About a Debt T | hat Vau Alrandy Listed | | | | | |
| 5. Use the is trying have reported to ha | is page only if ying to collect fromore than one cold for any debts | you have others to be notified about myou for a debt you owe to some creditor for any of the debts that you in Parts 1 or 2, do not fill out or sumounts for Each Type of Unsec | it your bankruptcy, for a debt that yone else, list the original creditor in u listed in Parts 1 or 2, list the additionit this page. | Parts 1 dional cre | or 2, then editors he | list the collection ager re. If you do not have a | ncy here. Simi additional pers | larly, if you sons to be |
| | f unsecured cla | | This information is for statistical re | porting | purposes | Total Claim | Add the amou | nts for each |
| | 6a. | Domestic support obligations | | 6a. | \$ | | 00 | |
| Total cla | | Taxes and certain other debts yo | u owe the government | 6b. | \$ | | 00 | |
| | 6c. | Claims for death or personal inju | - | 6c. | \$ — | | 00 | |
| | 6d. | • | red claims. Write that amount here. | 6d. | \$ | | 00 | |
| | 6e. | Total Priority. Add lines 6a through | n 6d. | 6e. | \$ | 0. | 00 | |
| | 6f. | Student loans | | 6f. | \$ | Total Claim 0 . | 00 | |
| Total cla | | Obligations arising out of a sepa | ration agreement or divorce that | | | 0 | 00 | |

6g.

6h.

0.00

0.00

you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Page 27 of 59 Case number (f know) Document

Debtor 1 CARDENALES ROLON, JORGE LUIS

Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. 67,674.53

Total Nonpriority. Add lines 6f through 6i.

6j. 67,674.53

| Fill in th | nis information to identi | fy your case: | | |
|---------------------|---------------------------|--------------------|-------------------------|---------------------|
| Debtor 1 | JORGE LUIS CA | RDENALES ROLON | | |
| | First Name | Middle Name | Last Name |) |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF PUERTO | RICO, SAN JUAN DIVISION | |
| Case number | | | | |
| (if known) | | | | Check if this is an |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with | whom you have th | e contract or lease | State what the contract or lease is for |
|------|-----------|----------------|-------------------------------|---------------------|---|
| 2.1 | | Name, Number | , Street, City, State and ZIF | P Code | |
| ۷. ۱ | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | <u></u> |
| 2.2 | | | | | <u></u> |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | <u> </u> |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.5 | - | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 29 of 59

| F | Fill in this information to identi | fy your case: | L Paye 29 0 | 158 |
|--|--|--|--|--|
| Debtor 1 | JORGE LUIS CA | RDENALES ROLON | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, t | iling) First Name | Middle Name | Last Name | |
| | tates Bankruptcy Court for the: | DISTRICT OF PUERTO R | ICO SAN IHAN DIVI | SION |
| United 5 | lates Bankruptcy Court for the. | DISTRICT OF FOLKTOR | ICO, SAN JOAN DIVI | SION |
| Case nur | mber | | | ☐ Check if this is an |
| () | | | | amended filing |
| O((; ; | 15 40011 | | | |
| | al Form 106H | | | |
| Sche | dule H: Your Cod | ebtors | | 12/15 |
| are filing and numl case num 1. Do I No I Ye 2. W Calif | together, both are equally respond the entries in the boxes on the distribution of the control o | ponsible for supplying corrected left. Attach the Addition question. you are filing a joint case, do not lived in a community proper, New Mexico, Puerto Rico, To | ect information. If mo lal Page to this page. ot list either spouse as erty state or territory exas, Washington, and | ? (Community property states and territories include Arizona, |
| | In which community state | e or territory did you live? | -NONE- | . Fill in the name and current address of that person. |
| line : 1060 | 2 again as a codebtor only if the | p Code ors. Do not include your spo nat person is a guarantor or | cosigner. Make sure | your spouse is filing with you. List the person shown in you have listed the creditor on Schedule D (Official Form e Schedule D, Schedule E/F, or Schedule G to fill out |
| Oolu | | | | 0./ |
| | Column 1: Your codebtor Name, Number, Street, City, State and 2 | ZIP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 24 | | | | ☐ Schedule D, line |
| 3.1 | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street City | State | ZIP Code | _ |
| 3.2 | Nome | | | Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | Number Chr 1 | | | |
| | Number Street City | State | ZIP Code | |

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Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 30 of 59

| Fill | in this information to identify your | case: | | | | l | | | | |
|-------------|---|--|--|--------------|-------|--------------|------------------------|--------------|--------------------------------|------------|
| Del | btor 1 JORGE LU | IIS CARDENALES ROI | _ON | | | | | | | |
| _ | btor 2 puse, if filing) | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court for th | ne: DISTRICT OF PUER DIVISION | TO RICO, SAN JUA | N | | | | | | |
| (If kr | se number | | - | | | □ A | | ed filing | g postpetition o | chapter 13 |
| | fficial Form 106l | | | | | M | IM / DD/ \ | YYYY | | |
| | chedule I: Your Inc | | | | | | | | | 12/1 |
| spo atta | plying correct information. If you see. If you are separated and you has separate sheet to this form The separate sheet to this form Describe Employment Fill in your employment | ur spouse is not filing wit On the top of any additio | h you, do not inclu nal pages, write yo | de inform | atior | about y | our spou ber (if kn | ise. If more | e space is ne swer every qu | eded, |
| | information. | | Debtor 1 | | | | | | ling spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | | ☐ Empl | • | | |
| | information about additional | , , | ☐ Not employed | | | | ☐ Not e | mployed | | |
| | employers. | Occupation | Contractor | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | JAF Commur | nications | Inc | | | | | |
| | Occupation may include studen homemaker, if it applies. | or Employer's address | PO Box 11468 Capara Heigh | | 922 | | | | | |
| | | How long employed ti | nere? <u>10 ye</u> | ars and 9 |) mc | onths | _ | | | |
| Par | rt 2: Give Details About M | onthly Income | | | | | | | | |
| unle | mate monthly income as of the ss you are separated. | | | | | | | | | |
| • | u or your non-filing spouse have m ce, attach a separate sheet to this f | | bine the information t | for all empl | oyers | s for that p | person on | the lines b | elow. If you ne | ed more |
| | | | | | | For Deb | otor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly, | | | 2. | \$ | 2, | 521.64 | \$ | N/A | |
| 3. | Estimate and list monthly ove | rtime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add | ine 2 + line 3. | | 4. | \$ | 2,52 | 21.64 | \$ | N/A | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 31 of 59

| Debt | tor 1 | CARDENALES ROLON, JORGE LUIS | _ | Case | number (if known) | | | |
|------|-------|---|------------|----------|---|-------------------------|---------|----------|
| | | | _ | | | | | |
| | | | | | Dahtan 4 | Fan Dahtan | 0 | |
| | | | | For | Debtor 1 | For Debtor non-filing s | | |
| | Cop | y line 4 here | 4. | \$ | 2,521.64 | \$ | N/A | |
| | О С Р | , | •• | *— | 2,321.04 | | IVA | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 115.75 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | <u> </u> | 0.00 | \$ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | <u> </u> | | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ _ | 0.00 | \$ | | |
| | | • • • • | | * * | 0.00 | · | N/A | |
| | 5e. | Insurance | 5e. | · · — | 0.00 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$_ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: I/Tax | 5h.+ | · · — | | + \$ | N/A | |
| | | Driver | _ | \$ | 2.08 | \$ | N/A | |
| | | Medical | _ | \$ | 26.91 | \$ | N/A | |
| | | Union | | \$ | 43.33 | \$ | N/A | |
| | | Aflac | | \$ | 37.87 | \$ | N/A | |
| | | Diver | _ | \$ | 0.09 | \$ | N/A | |
| | | Advance | | \$ | 12.09 | \$ | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 344.03 | \$ | N/A | |
| 7. | Calc | sulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,177.61 | \$ | N/A | |
| 8. | l iet | all other income regularly received: | | _ | | | | |
| 0. | 8a. | Net income from rental property and from operating a business, | | | | | | |
| | ou. | profession, or farm | | | | | | |
| | | Attach a statement for each property and business showing gross | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | | | | | | |
| | | regularly receive | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | <u> </u> | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$- | 0.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive | oe. | Ψ_ | 0.00 | Ψ | IN/A | |
| | OI. | Include cash assistance and the value (if known) of any non-cash assistance | | | | | | |
| | | that you receive, such as food stamps (benefits under the Supplemental | | | | | | |
| | | Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | | Specify: | 8f. | \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | N/A | |
| | | | _ | | | | | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| | | | ' | | | | | |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. \$ | • | 2,177.61 + \$ | N/A | = \$ 2 | 2,177.61 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 14/1 | * — | -,177.01 |
| | | . | , – | | | | | |
| 11. | | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your de | | to vou | r roommatoe and | 4 | | |
| | | r friends or relatives. | penden | is, you | i iooiiiiiales, aiil | ı | | |
| | | ot include any amounts already included in lines 2-10 or amounts that are not ava | ailable to | pay e | xpenses listed in | Schedule J. | | |
| | Spec | | | ' ' | | 11. | +\$ | 0.00 |
| | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The resu | | | | | | |
| | Write | e that amount on the Summary of Schedules and Statistical Summary of Certain | Liabilitie | s and | Related Data, if it | t applies 12. | \$ | 2,177.61 |
| | | | | | | | Combine | d |
| | | | | | | | monthly | |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form? | • | | | | - | |
| | | No. | | | | | | |
| | | Yes. Explain: | | | | | | |

Official Form 106I Schedule I: Your Income page 2

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 32 of 59

| ΞIII | in this information to identify you | ır case: | | | | |
|---------------|---|--|---|-------------|----------------------|-------------------------------|
| | - | | | | | |
| Deb | JORGE LUIS | CARDENALES ROLON | | | c if this is: | |
| Deh | otor 2 | | | _ | An amended filing | ing postpetition chapter 13 |
| | ouse, if filing) | | | | expenses as of the f | |
| | | | | | ' | |
| Unit | ted States Bankruptcy Court for the: | DISTRICT OF PUERTO RICO, SA | AN JUAN | N | MM / DD / YYYY | |
| | e number nown) | | | | | |
| 0 | fficial Form 106J | | | | | |
| S | chedule J: Your E | xpenses | | | | 12/15 |
| info (if k | ormation. If more space is need known). Answer every question | | | | | |
| 1. | Is this a joint case? | old | | | | |
| | ■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in | a separate household? | | | | |
| | □ No | а сора: а с по а с по а с по а с | | | | |
| | = : : : | file Official Form 106J-2, Expenses f | or Separate Househo | Idof Debtor | 2. | |
| 2. | Do you have dependents? | □No | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor 2 | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | COMMON LAW | Spouse | 52 | ■ Yes |
| | | | | | | □ No |
| | | | NFS's Grandau | ghter | 12 | ■ Yes |
| | | | | | | □No |
| | | | | | | ☐ Yes |
| | | | | | | □ No |
| | | | | | | ☐ Yes |
| 3. | Do your expenses include | ■ No | | | | |
| | expenses of people other that | | | | | |
| | yourself and your dependent | ts? Yes | | | | |
| Dor | t 3: Estimate Vous Ongoine | a Monthly Exponent | | | | |
| Est exp | | g Monthly Expenses Ir bankruptcy filing date unless yo Inkruptcy is filed. If this is a supple | | | | |
| | | on-cash government assistance if ye included it on Schedule I: Your I | | | | |
| | ficial Form 106l.) | | | | Your expe | enses |
| 4. | The rental or home ownership payments and any rent for the g | ip expenses for your residence. Inc ground or lot. | clude first mortgage | 4. \$ | | 470.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, o | or renter's insurance | | 4b. \$ | | 0.00 |
| | • • • | air, and upkeep expenses | | 4c. \$ | | 40.00 |
| | 4d. Homeowner's associatio | n or condominium dues | | 4d. \$ | - | 0.00 |
| 5. | Additional mortgage paymen | nts for your residence, such as hom | e equity loans | 5. \$ | | 0.00 |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 33 of 59

| Deb | or 1 CARDENALES ROLON, JORGE LUIS | Case number (if known) | |
|-------------|--|------------------------|----------------------------|
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. \$ | 210.00 |
| | 6b. Water, sewer, garbage collection | 6b. \$ | 60.94 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 110.00 |
| | 6d. Other. Specify: Gas Stove | 6d. \$ | 35.00 |
| 7. | Food and housekeeping supplies | 7. \$ | 680.00 |
| 8. | Childcare and children's education costs | 8. \$ | 20.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. \$ | 55.00 |
| | Personal care products and services | 10. \$ | 110.00 |
| 11. | Medical and dental expenses | 11. \$ | 20.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | 🗸 | 20.00 |
| ۷. | Do not include car payments. | 12. \$ | 346.67 |
| 3. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 20.00 |
| | Charitable contributions and religious donations | 14. \$ | 0.00 |
| | Insurance. | · | <u> </u> |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. \$ | 0.00 |
| | 15b. Health insurance | 15b. \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. \$ | 0.00 |
| | 15d. Other insurance. Specify: | 15d. \$ | 0.00 |
| 6. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | 0.00 |
| ٠. | Specify: | 16. \$ | 0.00 |
| 7. | Installment or lease payments: 17a. Car payments for Vehicle 1 | 17a. \$ | 0.00 |
| | • • | 17b. \$ | |
| | 17b. Car payments for Vehicle 2 | · | 0.00 |
| | 17c. Other Specify: | 17c. \$ | 0.00 |
| _ | 17d. Other. Specify: | 17d. \$ | 0.00 |
| 8. | Your payments of alimony, maintenance, and support that you did not report | | 0.00 |
| ۵ | deducted from your pay on line 5, Schedule I, Your Income (Official Form 10 Other payments you make to support others who do not live with you. | δι). | 0.00 |
| ٥. | Specify: | 19. | 0.00 |
| Ω | Other real property expenses not included in lines 4 or 5 of this form or on 5 | | |
| Ο. | 20a. Mortgages on other property | 20a. \$ | 0.00 |
| | 20b. Real estate taxes | 20b. \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20d. \$ | |
| 4 | | · | 0.00 |
| 1. | Other: Specify: | 21. +\$ | 0.00 |
| 2. | Calculate your monthly expenses | | |
| | 22a. Add lines 4 through 21. | \$ | 2,177.61 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106 | J-2 \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ | 2,177.61 |
| 3. | Calculate your monthly net income. | | |
| | 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 2,177.61 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b\$ | 2,177.61 |
| | 23c. Subtract your monthly expenses from your monthly income. | | |
| | The result is your monthly net income. | 23c. \$ | 0.00 |
| <u>'</u> 4. | Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage? No. | | e or decrease because of a |
| | ☐ Yes. Explain here: | | |
| | LAPIGIT HOLE. | | |

| FIII III UIIS II | nformation to identify yo | our case: | | | |
|--|---|--|--|--|---|
| Debtor 1 | | RDENALES ROLON | | | |
| Dobtor 2 | First Name | Middle Name | Last Name | } | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF PUERT | TO RICO, SAN JUAN DIVISION | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | |
| Official For | m 106Dec | | | | |
| Declara ¹ | tion About a | an Individua | al Debtor's Sch | edules | 12/15 |
| if true menuical m | aanla ara filing tagathar | hath are savelly rooms | onsible for supplying correct in | -f | |
| ii two married po | eopie are ming together | , both are equally respo | onsible for supplying correct in | iioiiiatioii. | |
| | | | | | |
| | | | s or amended schedules. Mak | | |
| obtaining mone | y or property by fraud ir | n connection with a ban | s or amended schedules. Mak kruptcy case can result in fine | | |
| obtaining mone | | n connection with a ban | | | |
| obtaining mone | y or property by fraud ir | n connection with a ban | | | |
| obtaining mone years, or both. 1 | y or property by fraud ir | n connection with a ban | | | |
| obtaining mone years, or both. 1 Sig | y or property by fraud ir I8 U.S.C. §§ 152, 1341, 19 gn Below | n connection with a ban 519, and 3571. | | es up to \$250,000, | |
| obtaining mone years, or both. 1 Sig | y or property by fraud ir I8 U.S.C. §§ 152, 1341, 19 gn Below | n connection with a ban 519, and 3571. | kruptcy case can result in fine | es up to \$250,000, | |
| obtaining mone years, or both. 1 Sig Did you pa | y or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below | n connection with a ban 519, and 3571. | kruptcy case can result in fine | uptcy forms? | or imprisonment for up to 20 |
| obtaining mone years, or both. 1 Sig Did you pa | y or property by fraud ir I8 U.S.C. §§ 152, 1341, 19 gn Below | n connection with a ban 519, and 3571. | kruptcy case can result in fine | uptcy forms? Attach Bank | |
| obtaining mone years, or both. 1 Sig Did you pa No Yes. | y or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay some | n connection with a ban 519, and 3571. | kruptcy case can result in fine | uptcy forms? Attach Bank Declaration, | cruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| Did you pa | y or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay some | n connection with a ban 519, and 3571. | kruptcy case can result in fine | uptcy forms? Attach Bank Declaration, | cruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| Did you pa No Yes. Under penathat they ar | y or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay some Name of person | n connection with a ban 519, and 3571. cone who is NOT an atto that I have read the sun | kruptcy case can result in fine | uptcy forms? Attach Bank Declaration, | cruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| Did you pa Did you pa No Yes. Under penathat they ar X /s/ JO JORG | y or property by fraud in 18 U.S.C. §§ 152, 1341, 19 gn Below ay or agree to pay some Name of person alty of perjury, I declare the true and correct. | n connection with a ban 519, and 3571. cone who is NOT an atto that I have read the sun | rney to help you fill out bankr | uptcy forms? Attach Bank Declaration, | cruptcy Petition Preparer's Notice, and Signature (Official Form 119) |

| Fill in 41 | hia information to identi | ify your coop | AIL 1 496 99 91 99 | |
|---|---------------------------|--|--------------------|--------------------------------------|
| FIII IN U | his information to identi | ity your case: | | |
| Debtor 1 | JORGE LUIS CA | | | |
| | First Name | Middle Name | Last Name |) |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | DISTRICT OF PUERTO RICO, SAN JUAN DIVISION | | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| - | | | |
|-----|---|-----------------------------------|--------------------|
| Par | t1: Summarize Your Assets | | |
| | | Your assets Value of what you own | |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 103,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 21,500.66 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 124,500.66 |
| Par | 2: Summarize Your Liabilities | | |
| | | Your liabilities Amount you owe | |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 89,289.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j d\$chedule E/F | \$ | 67,674.53 |
| | Your total liabilities | \$ | 156,963.53 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I | \$ | 2,177.61 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,177.61 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | her schedu | ıles. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a perpurpose." 11 U.S.C. § 101(8). Fill out lines 8-9q for statistical purposes. 28 U.S.C.§ 159. | ersonal, far | mily, or household |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

Debtor 1 CARDENALES ROLON, JORGE LUIS

ge 36 of 59 Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|----|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$0.0 | 10 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.0 | 10 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.0 | 0 |
| 9d. Student loans. (Copy line 6f.) | \$0.0 | 0 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0 |
| 9g. Total. Add lines 9a through 9f. | \$0.00 | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 37 of 59

| | Fill in this | information to identi | fy your case: | | | |
|----------------|------------------------|--|-------------------------------------|--|--|-------------------------------------|
| Debt | | | ARDENALES ROLON | | | |
| Dobt | 01 1 | First Name | Middle Name | Last Name | | |
| Debt (Spous | or 2 se if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Bar | nkruptcy Court for the: | DISTRICT OF PUERTO | RICO, SAN JUAN DIVISION | | |
| Case | e number | | | | | |
| (if kno | _ | | | | - | heck if this is an mended filing |
| | | | | | | 3 |
| Offi | icial For | rm 107 | | | | |
| Sta | tement | of Financial | Affairs for Individ | duals Filing for B | ankruptcy | 4/16 |
| | | | | | qually responsible for supply | |
| | | ore space is needed, a er every question. | attach a separate sneet to ti | his form. On the top of any a | additional pages, write your r | name and case number |
| Part | 1: Give D | etails About Your Ma | rital Status and Where You | Lived Before | | |
| 1. \ | What is your | current marital statu | s? | | | |
| ı | ☐ Married | | | | | |
| Ī | Not mari | ried | | | | |
| 2. I | During the la | st 3 years, have you | lived anywhere other than v | where you live now? | | |
| ı | ■ No | | | | | |
| Ī | _ | all of the places you liv | red in the last 3 years. Do not i | nclude where you live now. | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 there | lived Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | y property state or territory? o, Texas, Washington and Wis | |
| ı | □ No | | | | | |
| I | Yes. Mal | ke sure you fill out <i>Sch</i> e | edule H: Your Codebtors (Offi | cial Form 106H). | | |
| Part | 2 Evolair | n the Sources of Your | Income | | | |
| . art | Explain | Time Courses of Tour | - Indonic | | | |
| F | Fill in the tota | I amount of income you | received from all jobs and a | g a business during this yea Il businesses, including part- ogether, list it only once under | | ar years? |
| ı | □ No | | | | | |
| Ī | _ | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$18,778.90 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main

Debtor 1 CARDENALES ROLON, JORGE LUIS Page 38 of 59 Case number (if known)

| | | | | Debtor 1 | | | Debtor 2 | | |
|----|---|---|---|--|---|---|---|---------------------------------|---|
| | | | | Sources of income Check all that apply. | (before | s income re deductions and sions) | Sources of ince Check all that a | | Gross income (before deductions and exclusions) |
| | last calen nuary 1 to | dar year: December | 31, 2017) | ■ Wages, commissions, bonuses, tips | | \$19,331.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a | ousiness | |
| 5. | Include incother public you are fili | come regard c benefit pay ng a joint ca | ess of whether ments; pension se and you have | during this year or the two that income is taxable. Exam ns; rental income; interest; di e income that you received to e from each source separate | nples of <i>o</i> ividends; ogether, lis | ther income are alin money collected fror st it only once under | n lawsuits; royalties; Debtor 1. | | |
| | ■ No □ Yes. | Fill in the de | etails. | | | | | | |
| | | | | Debtor 1 Sources of income Describe below. | each (before | s income from source re deductions and | Debtor 2 Sources of inco Describe below. | ome | Gross income (before deductions and exclusions) |
| | | | | | exclu | sions) | | | |
| 6. | Are either ☐ No. | Neither De individual p | ebtor 1 nor De orimarily for a po 90 days before Go to line 7. | debts primarily consumer btor 2 has primarily consu ersonal, family, or household you filed for bankruptcy, did | imer deb purpose. I you pay a | " any creditor a total o | f \$6,425* or more? | | , |
| | | | creditor. Do payments to | ch creditor to whom you paid not include payments for do an attorney for this bankrupto on 4/01/19 and every 3 years | mestic su cy case. | pport obligations, s | uch as child suppor | t and alimony | |
| | Yes. | | | both have primarily consugeryou filed for bankruptcy, did | | | f \$600 or more? | | |
| | | ■ No. | Go to line 7. | | | | | | |
| | | □ Yes | | ch creditor to whom you paid domestic support obligation cy case. | | | | | |
| | Creditor' | s Name and | d Address | Dates of payme | ent | Total amount paid | Amount you still owe | Was this p | ayment for |
| 7. | Insiders in which you | clude your re are an office | elatives; any ge er, director, pers | ankruptcy, did you make a neral partners; relatives of ar son in control, or owner of 20 etor. 11 U.S.C. § 101. Includ | ny general 1% or mor | partners; partnersh e of their voting secu | ips of which you are urities; and any mana | a general par aging agent, i | tner; corporations of ncluding one for a |
| | ■ No □ Yes. | List all pavm | ents to an insid | ler. | | | | | |
| | | Name and | | Dates of payme | ent | Total amount paid | Amount you still owe | Reason for | this payment |

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main

Page 39 of 59 Case number (if known) Debtor 1 CARDENALES ROLON, JORGE LUIS Document

| | insider? Include payments on debts guaranteed or cosig | ned by an insider. | | | | |
|------|--|--|------------------------|----------------------|-------------------------|------------------------------|
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name |
| Par | t 4: Identify Legal Actions, Repossession | s and Foreclosures | • | | | |
| ı aı | te. Identify Legal Actions, Repossession | s, and i oreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below | | erty repossessed, fo | reclosed, garnisl | ned, attached, | seized, or levied? |
| | No. Go to line 11. | | | | | |
| | Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happened | d | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details. | | uding a bank or fina | ancial institution, | set off any an | nounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date take | action was | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an | | erty in the possessio | on of an assignee | for the benefi | t of creditors, a |
| | ■ No □ Yes | | | | | |
| Par | t 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift. | cy, did you give any gifts | s with a total value o | of more than \$600 | per person? | |
| | Gifts with a total value of more than \$600 p person | 00 per Describe the gifts Dates you gave the gifts | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | |
| 14. | Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or contr | | s or contributions w | ith a total value o | of more than \$6 | 600 to any charity? |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | u contributed | | s you ributed | Value |
| | , | | | | | |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 40 of 59 Case number (if known)

| | or gambling? | | | |
|-----|--|--|--|------------------------|
| | ■ No | | | |
| | ☐ Yes. Fill in the details. | | | |
| | how the loss occurred Incl | cribe any insurance coverage for the loss ude the amount that insurance has paid. List trance claims on line 33 of Schedule A/B: Pro | pending | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | | | |
| 16. | Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepare Include any attorneys, bankruptcy petition prepare | ring a bankruptcy petition? | | ty to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | | Description on Leabor of any manual | Data was was and an | A |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any propert transferred | y Date payment or transfer was made | Amount of payment |
| | Roberto Figueroa Carrasquillo, Esq PO Box 0186 Caguas, PR 00726-0186 | Pre-bankruptcy fees deposit | 11/21/2018 | \$1,000.00 |
| | CIN Legal Data Services 4540 Honeywell Ct Dayton, OH 45424-5760 | Bankruptcy Report | 11/21/2018 | \$33.00 |
| | DebtorCC 378 Summit Ave Jersey City, NJ 07306-3110 | Pre-bankruptcy Counseling Cer | tificate 12/13/2018 | \$14.95 |
| 17. | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you list | or to make payments to your creditors? | half pay or transfer any proper | ty to anyone who |
| | ☐ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any propert transferred | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made gifts and transfers that you have already listed on No Yes. Fill in the details. | siness or financial affairs? e as security (such as the granting of a securit | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| 19. | Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No Yes. Fill in the details. | | settled trust or similar device o | of which you are a |
| | Name of trust | Description and value of the property | transferred | Date Transfer was made |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 41 of 59 Case number (if known)

| Par | t 8: List of Certain Financial Accounts, Inst | ruments, Safe Deposit | Boxes, and Storag | je Units | | |
|-----|---|--|----------------------------|--|------------------|---|
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details. | other financial account | s; certificates of | • | , | , |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | or Date accoun closed, sold moved, or transferred | | ast balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 yo cash, or other valuables? | ear before you filed for | bankruptcy, any s | afe deposit box or oth | er depository | for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S and ZIP Code) | | escribe the contents | | Do you still have it? |
| 22. | Have you stored property in a storage unit or | place other than your | home within 1 yea | r before you filed for I | oankruptcy? | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S and ZIP Code) | | escribe the contents | | Do you still have it? |
| Par | 19: Identify Property You Hold or Control f | or Someone Else | | | | |
| 23. | Do you hold or control any property that son someone. | neone else owns? Inclu | de any property y | ou borrowed from, are | storing for, o | or hold in trust for |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | escribe the property | | Value |
| Par | 110: Give Details About Environmental Info | rmation | | | | |
| For | the purpose of Part 10, the following definition | ns apply: | | | | |
| • | Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances, | air, land, soil, surface | | | | |
| | Site means any location, facility, or property own, operate, or utilize it, including disposal | • | nvironmental law, | whether you now owr | ı, operate, or ı | utilize it or used to |
| | Hazardous material means anything an envir material, pollutant, contaminant, or similar te | | s a hazardous was | ste, hazardous substa | nce, toxic sub | stance, hazardous |
| Rep | ort all notices, releases, and proceedings that | you know about, regar | dless of when the | y occurred. | | |
| 24. | Has any governmental unit notified you that | you may be liable or po | tentially liable und | der or in violation of a | n environmen | tal law? |
| | ■ No | | | | | |
| | Yes. Fill in the details. | Governmental | 14 | Environmental law | if you | Date of notice |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental un Address (Number, S ZIP Code) | | Environmental law, know it | n you | Date of notice |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main 59 Case number (if known) Document Page 42 of Debtor 1 CARDENALES ROLON, JORGE LUI 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ JORGE LUIS CARDENALES ROLON Signature of Debtor 2 **JORGE LUIS CARDENALES ROLON** Signature of Debtor 1 Date December 14, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 43 of 59

| Fill in this information to identify | () () () () () () | | | | | |
|--|--|--|--|--|--|------------------------------------|
| Fill in this information to identify | your case. | | | eck one box only as c 2A-1Supp: | directed in this form and | in Form |
| Debtor 1 JORGE LUIS | S CARDENALES ROLON | l | | .л-10upp. | | |
| Debtor 2 (Spouse, if filing) | | | | ☐ 1. There is no pres | sumption of abuse | |
| (Opodoo, ii iiiiiig) | District of Duarts [| Diag Can luan | | 2. The calculation | to determine if a presun | nption of abuse |
| United States Bankruptcy Cour | District of Puerto F Division | Rico, San Juan | | applies will be r | nade under <i>Chapter 7 M</i> icial Form 122A-2). | • |
| Case number (if known) | | | _ | | does not apply now becout it could apply later. | ause of qualified |
| | | | | ☐ Check if this is a | an amended filing | |
| Official Form 122A | ۱ - 1 | | | | | |
| Chapter 7 Statem | | rent Mor | thly Inc | ome | | 12/15 |
| 1. What is your marital and Not married. Fill out Co Married and your spo Married and your spo Living in the same Living separately o | ude the line number to which the hat you are exempted from a proceed from the statement of Exemption from Fourrent Monthly Income If filing status? Check one only olumn A, lines 2-11. The se is filing with you. Fill our ouse is NOT filing with you. You household and are not legal or are legally separated. Fill our output fill output fill our output fill our output fill our output fill output fill our output fill our output fill output f | e additional inforcesumption of above and your state and your state and columns fou and your state and column A, lire and colum | mation applies. use because you buse Under § 70 A and B, lines 2 pouse are: ill out both Columes 2-11; do not | On the top of any addit do not have primarily 7(b)(2) (Official Form 1 -11. The standard of t | tional pages, write your r consumer debts or beca 22A-1Supp) with this for the consumer of the consumer of the thickness of the consumer of th | name and case use of qualifying m. |
| | at you and your spouse are legated at do not include evading the M | | | | r that you and your spou | se are living |
| 101(10A). For example, if you are 6 months, add the income for all | ome that you received from all see filing on September 15, the 6-mm 6 months and divide the total by 6 at the income from that property in | onth period would 6. Fill in the result. | be March 1 through Do not include an | gh August 31. If the amoust income amount more | ount of your monthly incom than once. For example, if | e varied during the |
| | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| Your gross wages, salary payroll deductions). | y, tips, bonuses, overtime, a | and commission | ns (before all | \$ 2,327.67 | \$ | |
| Alimony and maintenance | ce payments. Do not include | payments from a | a spouse if | | | |
| Column B is filled in. | | | | \$ | \$ | |
| from an unmarried partner, | nts, including child support. members of your household, your contributions from a spouse | Include regular your dependents | contributions , parents, and | ·.\$0.00_ | \$ | |
| 5. Net income from operation | ng a business, profession, o | | | | | |
| | | | otor 1 | | | |
| Gross receipts (before all o | leductions) | \$ 0.00 | | | | |
| Ordinary and necessary op | • • | -\$ 0.00 | 0 | 0.00 | Φ. | |
| Net monthly income from a | a business, profession, or farr | n \$ | Copy here -> | \$ | \$ | |
| 6. Net income from rental a | nd other real property | | .t | | | |
| _ | | | otor 1 | | | |
| Gross receipts (before all c | • | \$ 0.00 | | | | |
| Ordinary and necessary op | • . | -\$ 0.00 | Convibers | e 0.00 | ¢ | |
| Net monthly income from i | rental or other real property | \$ 0.00 | Copy here -> | \$ 0.00 | \$ | |

Official Form 122A-1

0.00

7. Interest, dividends, and royalties

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 44 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing s | | |
|------|--|--|------------|-------------------|-------------|-----------------------------------|------------|----------------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | | |
| | Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here: | eceived was a benefit ur | der the | | | | | |
| | For your spouse \$ | 0.0 | 00 | | | | | |
| | . o. you. opouco | | | | | | | |
| 9. | Pension or retirement income. Do not include any amo under the Social Security Act. | unt received that was a | benefit | \$ | 0.00 | \$ | | , |
| 10. | Income from all other sources not listed above. Specinot include any benefits received under the Social Securit a victim of a war crime, a crime against humanity, or interior lift necessary, list other sources on a separate page and put | y Act or payments receinational or domestic teri | ved as | | | | | |
| | · | | _ | \$ | 0.00 | \$ | | |
| | | | | \$ | 0.00 | \$ | | |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | | 1 |
| 11. | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total | | \$ | 2,327.67 | + = _ | |]=[s | 2,327.67 |
| | | | | | | | income | urrent monthly |
| Part | 2: Determine Whether the Means Test Applies to | You | | | | | | |
| 12. | Calculate your current monthly income for the year. | Follow these steps: | | | | | | |
| | 12a. Copy your total current monthly income from line 1 | 1 | | Сору | line 11 h | ere=> | \$ | 2,327.67 |
| | Multiply by 12 (the number of months in a year) | | | | | | x 1 | |
| | 12b. The result is your annual income for this part of the f | form | | | | 12b. | \$2 | 27,932.04 |
| 13. | Calculate the median family income that applies to y | ou. Follow these steps: | | | | | | |
| | Fill in the state in which you live. | PR | | | | | | |
| | Fill in the number of people in your household. | 3 | | | | | | |
| | Fill in the median family income for your state and size of | | | | | 13. | \$2 | 25,194.00 |
| | To find a list of applicable median income amounts, go of form. This list may also be available at the bankruptcy of | 0 1 | ecified ir | n the separate | e instructi | ons for this | | |
| 14. | How do the lines compare? | | | | | | | |
| | 14a. | n the top of page 1, che | ck box | 1T,here is no p | resumptic | n of abuse. | | |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | f page 1, check box 27, | he presu | umption of abu | use is dete | ermined by Fo | orm 122A- | 2. |
| Part | 3: Sign Below | | | | | | | |
| | By signing here, I declare under penalty of perjury th | at the information on th | s staten | nent and in an | y attachm | ents is true ar | nd correct | |
| | X /s/ JORGE LUIS CARDENALES ROLON JORGE LUIS CARDENALES ROLON Signature of Debtor 1 | <u> </u> | | | | | | |
| | Date December 14, 2018 MM / DD / YYYY | | | | | | | |
| | If you checked line 14a, do NOT fill out or file Form | n 122A-2. | | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and fil | le it with this form. | | | | | | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 45 of 59

| Fill in this info | Fill in this information to identify your case: | | | | | |
|--------------------------------|---|---|--|--|--|--|
| Debtor 1 | JORGE LUIS CARD | ENALES ROLON | | | | |
| Debtor 2 (Spouse, if filing | 1) | | | | | |
| United States B | ankruptcy Court for the: | District of Puerto Rico, San Juan Division | | | | |
| Case number (if known) | | | | | | |

| Check the appropriate box as directed in lines 40 or 42: |
|---|
| According to the calculations required by this Statement: |
| ■ 1. There is no presumption of abuse. |
| ☐ 2. There is a presumption of abuse. |
| ☐ Check if this is an amended filing |

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

| Par | 1: Determine Your Adjusted Income | | | | | |
|-----|--|-------------------|---------------------------------------|-----------------|--------------------|-------------------|
| 1. | Copy your total current monthly income. | Copy line 11 from | Official Form 122A | -1 here=> | \$ | 2,327.67 |
| 2. | Did you fill out Column B in Part 1 of Form 122A-1? ■ No. Fill in \$0 for the total on line 3. □ Yes. Is your spouse Filing with you? | | | | | |
| | ☐ No. Go to line 3. ☐ Yes. Fill in \$0 the total on line 3. | | | | | |
| 3. | Adjust your current monthly income by subtracting any household expenses of you or your dependents. Follow to On line 11, Column B of Form 122A-1, was any amount of the you or your dependents? No. Fill in 0 for the total on line 3. | hese steps: | | | or the house | ehold expenses of |
| | ☐ Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's t | | Fill in the amount are subtracting fr | | | |
| | support other than you or your dependents. | ax debt of to | your spouse's inc | come | | |
| | | | \$ \$ | | | |
| | Total. | | \$ 0.00 | Copy total here | :=> \$ _ | 0.00 |
| 4. | Adjust your current monthly income. Subtract line 3 from | ı line 1. | | | \$ | 2,327.67 |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 46 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

Case number (if known)

| Part 2: | _ | | |
|---------|----|----|----|
| Fall Z. | D. | Α. | О. |
| | | | ۷. |

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3 Living 0 Housing

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,384.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ 52
- 7b. Number of people who are under 65 X
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 156.00 Copy here=> \$ 156.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114
- 7e. Number of people who are 65 or older X **0**
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 47 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

| Loc | al Sta | andards You must use the IRS Local Standards to ans | wer the | questions in line | es 8-15. | | |
|-----|--|--|-----------------|-------------------|---|-----|--|
| | Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: | | | | | | |
| | lous | ing and utilities - Insurance and operating expenses | | | | | |
| | lous | ing and utilities - Mortgage or rent expenses | | | | | |
| То | answ | er the questions in lines 8-9, use the U.S. Trustee Pro | gram cha | art. | | | |
| | | e chart, go online using the link specified in the separate t may also be available at the bankruptcy clerk's office. | instruction | ons for this form | n. | | |
| 8. | | using and utilities - Insurance and operating expenses dollar amount listed for your county for insurance and opera | | | | .00 | |
| 9. | Ηοι | sing and utilities - Mortgage or rent expenses: | | | | | |
| | 9a. | Using the number of people you entered in line 5, fill in t listed for your county for mortgage or rent expenses | | | \$722.00 | | |
| | 9b. | Total average monthly payment for all mortgages and other | er debts s | secured by your | home. | | |
| | To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. | | | | | | |
| | | Name of the creditor | Averag payme | ge monthly ent | | | |
| | | Scotiabank de Puerto Rico | \$ | 1,488.15 | | | |
| | 0.5 | Total average monthly payment | \$ | 1,488.15 | Copy here=> -\$1,488.15 Repeat this amount on line 33a. | | |
| | 9c. | Net mortgage or rent expense. | | | | | |
| | | Subtract line 9b (total average monthly paymen) from lin rent expense). If this amount is less than \$0, enter \$0 | | | \$0.00 Copy | .00 | |
| 10. | | ou claim that the U.S. Trustee Program's division of th cts the calculation of your monthly expenses, fill in ar | | | | .00 | |
| | Ex | plain why: | | | | | |
| 11. | Loc | al transportation expenses: Check the number of vehicle | es for wh | ich you claim an | n ownership or operating expense. | | |
| | |). Go to line 14. | | | | | |
| | | . Go to line 12. | | | | | |
| | | 2 or more. Go to line 12. | | | | | |
| 12. | | icle operation expense: Using the IRS Local Standards enses, fill in the Operating Costs that apply for your Census | | | | .00 | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 48 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

| 13. | may r | tle ownership or lease expense: Using the IRS Local Solot claim the expense if you do not make any loan or lease chicles. | | | | |
|------|---------|---|---|-------------------------------------|---------------------------------------|--------|
| Ve | hicle 1 | | | | | |
| 13a | Owne | ership or leasing costs using IRS Local Standard | | \$ 497.00 | | |
| 13b | | ge monthly payment for all debts secured by Vehicle 1. t include costs for leased vehicles. | | | | |
| | contra | Iculate the average monthly payment here and on line actually due to each secured creditor in the 60 months aft divide by 60. | 3e, add all amounts tha er you filed for bankrupto | t are ry. | | |
| | 1 | Name of each creditor for Vehicle 1 | Average monthly payment | | | |
| | _ | NONE- | \$ | | | |
| | | Total Average Monthly Payment | \$0.00 | Copy here => -\$ | 0.00 Repeat this amount on line 33b. | |
| 13c. | | ehicle 1 ownership or lease expense act line 13b from line 13a. if this amount is less than \$0 | , enter \$0 | \$497.00 | Copy net Vehicle 1 expense here => \$ | 497.00 |
| Ve | hicle 2 | Describe Vehicle 2: | | | | |
| 13d | . Owne | ership or leasing costs using IRS Local Standard | | \$ 0.00 | | |
| 13e. | | ge monthly payment for all debts secured by Vehicle 2. D d vehicles. | o not include costs for | | | |
| | ı | Name of each creditor for Vehicle 2 | Average monthly payment | | | |
| | | | \$ | | | |
| | | Total Average Monthly Payment | \$ | Copy here => -\$ 0. | Repeat this amount on line 33c. | |
| 13f. | | ehicle 2 ownership or lease expense act line 13e from line 13d. if this amount is less than \$0 | , enter \$0 | \$0.00 | Copy net Vehicle 2 expense here => \$ | 0.00 |
| 14. | | c transportation expense: If you claimed 0 vehicles in portation expense allowance regardless of whether you up | | ocal Standards, fill in th <i>e</i> | ublic \$ | 0.00 |
| 15. | deduc | ional public transportation expense: If you claimed 1 at a public transportation expense, you may fill in what you than the IRS Local Standard for Public Transportation. | | | | 0.00 |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 49 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

| Othe | r Necessary Expenses | In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. | | |
|------|---|--|----------|----------|
| | self-employment taxes, Śoci your pay for these taxes. Ho | mount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 and the total monthly amount that is withheld to pay for taxes. | | 400.04 |
| | Do not include real estate, s | ales, or use taxes. | \$ | 106.84 |
| 17. | Involuntary deductions: T union dues, and uniform co | The total monthly payroll deductions that your job requires, such as retirement contributions, osts. | | |
| | Do not include amounts that | t are not required by your job, such as voluntary 401(k) contributions or payroll savings. | \$ | 210.72 |
| | together, include payments t | nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term. | \$ | 0.00 |
| 19. | Court-ordered payments: agency, such as spousal or | The total monthly amount that you pay as required by the order of a court or administrative child support payments. | | |
| | Do not include payments or | n past due obligations for spousal or child support. You will list these obligations in line 35. | \$ | 0.00 |
| 20. | Education: The total month as a condition for your jol | nly amount that you pay for education that is either required: | | |
| | | ntally challenged dependent child if no public education is available for similar services. | \$ | 0.00 |
| | , , , , | | · — | |
| 21. | | ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. | \$ | 0.00 |
| | Do not include payments for | r any elementary or secondary school education. | Φ_ | 0.00 |
| | required for the health and v | penses, excluding insurance costs: The monthly amount that you pay for health care that is welfare of you or your dependents and that is not reimbursed by insurance or paid by a health only the amount that is more than the total entered in line 7. | | |
| | Payments for health insuran | nce or health savings accounts should be listed only in line 25. | \$ | 0.00 |
| | you and your dependents, so | elephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer. | | |
| | , , | or basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted. | +\$ | 0.00 |
| | Add all of the expenses al Add lines 6 through 23. | llowed under the IRS expense allowances. | \$ | 3,092.56 |
| | Add lines 6 through 23. | | <u> </u> | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 50 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

| Add | Additional Expense Deductions These are additional deductions allowed by the Means Test. | | | | | | |
|-----|--|---|---|--|----------|------|--|
| | | Note: Do not include an | y expense allowances lis | sted in lines 6-24. | | | |
| 25. | | es. The monthly expenses for health ecessary for yourself, your spouse, or your | | | | | |
| | Health | insurance | \$0.00_ | | | | |
| | Disabi | | | | | | |
| | Health | | | | | | |
| | | | | | | | |
| | Total | | \$ | Copy total here=> | \$ | 0.00 | |
| | Do you | actually spend this total amount? | | | | | |
| | | No. How much do you actually spend? | | | | | |
| | | Yes | \$ | | | | |
| 26. | continu housel | nued contributions to the care of household or ue to pay for the reasonable and necessary care and nold or member of your immediate family who is una outions to an account of a qualified ABLE program. 2 | d support of an elderly, cable to pay for such expe | hronically ill, or disabled member of your | \$ | 0.00 | |
| 27. | | ction against family violence. The reasonably ned d your family under the Family Violence Prevention | | | | | |
| | By law | , the court must keep the nature of these expenses | confidential. | | \$ | 0.00 | |
| 28. | Additi | onal home energy costs. Your home energy costs | s are included in your ins | surance and operating expenses on line 8. | | | |
| | | pelieve that you have home energy costs that are mo I in the excess amount of home energy costs. | ore than the home energ | y costs included in expenses on line 8, | | | |
| | | ust give your case trustee documentation of your acd is reasonable and necessary. | tual expenses, and you i | must show that the additional amount | \$ | 0.00 | |
| 29. | \$160.4 | ation expenses for dependent children who are 12* per child) that you pay for your dependent children thary or secondary school. | | | | | |
| | | ust give your case trustee documentation of your acable and necessary and not already accounted for i | | must explain why the amount claimed is | | | |
| | * Subje | ect to adjustment on 4/01/19, and every 3 years after | r that for cases begun o | n or after the date of adjustment. | \$ | 0.00 | |
| 30. | than th | onal food and clothing expense. The monthly am ne combined food and clothing allowances in the II and and clothing allowances in the IRS National Sta | RS National Standards. | 0 1 | | | |
| | | d a chart showing the maximum additional allowance rm. This chart may also be available at the bankrupt | | specified in the separate instructions for | | | |
| | You m | ust show that the additional amount claimed is reas- | onable and necessary. | | \$ | 0.00 | |
| 31. | | nuing charitable contributions. The amount that ynents to a religious or charitable organization. 26 U. | | ibute in the form of cash or financial | +\$ | 0.00 | |
| | | | | | C | 0.00 | |
| 32. | | Il of the additional expense deductions. nes 25 through 31. | | | \$ | 0.00 | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 51 of 59

Debtor 1 CARDENALES ROLON, JORGE LUIS

| a. | or debts that are secured by an intere nd other secured debt, fill in lines 33a | st in property that you own, including home through 33e. | mortga | ges, vehicle loans | 5, | |
|--------------|--|--|-----------------------------|---|---------------|----------------------|
| | o calculate the total average monthly payr se 60 months after you file for bankruptcy. | ment, add all amounts that are contractually due . Then divide by 60. | to each s | secured creditor in | | |
| | Mortgages on your home: | | | | | verage monthly yment |
| 33a. | Copy line 9b here | | | =: | > \$ | 1,488.15 |
| | Loans on your first two vehicles: | | | | | |
| 33b. | Copy line 13b here | | | =) | > \$ | 0.00 |
| 33c. | Copy line 13e here | | | = | > \$ | 0.00 |
| 33d. | List other secured debts: | | | | | |
| Name | of each creditor for other secured debt | Identify property that secures the debt | | Does payment include taxes o insurance? | r | |
| | | | | □ No | | |
| | -NONE- | | | ☐ Yes | \$_ | |
| | | | | □ No | | |
| | | | | ☐ Yes | \$ | |
| | | | | - | - | |
| | | | | □ No | | |
| | | | | ☐ Yes | + \$ _ | |
| | | | | 4 400 45 | Copy total | . 4 400 45 |
| 33e. | Total average monthly payment. Add lin | nes 33a through 33d | \$ | 1,488.15 | here=> | \$ 1,488.15 |
| | | - | ' | | 111010-2 | Ψ 1,400.10 |
| | | secured by your primary residence, a vehicl port or the support of your dependents? | | | , | <u> </u> |
| 0 | ther property necessary for your supp No. Go to line 35. | secured by your primary residence, a vehicl port or the support of your dependents? | e, or | | inci d-2 | <u> </u> |
| 0 | ther property necessary for your supp No. Go to line 35. Yes. State any amount that you mus | secured by your primary residence, a vehicle port or the support of your dependents? st pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, divident | e, or | | incre=2 | <u> </u> |
| of ■ □ | ther property necessary for your supp No. Go to line 35. Yes. State any amount that you mus line 33, to keep possession of your support of your sup | secured by your primary residence, a vehicle port or the support of your dependents? st pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, divident | e, or | Total cure amount | J 11616-2 | Monthly cure amount |
| Nam | No. Go to line 35. Yes. State any amount that you mus line 33, to keep possession of you 60 and fill in the information below. | secured by your primary residence, a vehicle port or the support of your dependents? st pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividow. | e, or | amount | 60 = \$ | Monthly cure |
| Nam | ther property necessary for your supplements. So to line 35. Yes. State any amount that you mus line 33, to keep possession of you 60 and fill in the information below | secured by your primary residence, a vehicle port or the support of your dependents? st pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividow. | e, or listed in le by | amount | [| Monthly cure |
| Nam | ther property necessary for your supplements. So to line 35. Yes. State any amount that you mus line 33, to keep possession of you 60 and fill in the information below | secured by your primary residence, a vehicle port or the support of your dependents? It pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividentify property that secures the debt | e, or listed in le by | amount | [| Monthly cure amount |
| Nam -NC | ther property necessary for your supplements. No. Go to line 35. Yes. State any amount that you must line 33, to keep possession of you 60 and fill in the information below of the creditor ONE- | secured by your primary residence, a vehicle port or the support of your dependents? It pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividow. Identify property that secures the debt Totals a priority tax, child support, or alimony - the | e, or listed in le by | amount ÷ | 60 = \$ Copy | Monthly cure amount |
| Nam -NC | ther property necessary for your supplements. State any amount that you mus line 33, to keep possession of you 60 and fill in the information below of the creditor. DNE- o you owe any priority claims such as re past due as of the filling date of your | secured by your primary residence, a vehicle port or the support of your dependents? It pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividow. Identify property that secures the debt Totals a priority tax, child support, or alimony - the | e, or listed in le by | amount ÷ | 60 = \$ Copy | Monthly cure amount |
| Nam -NC | ther property necessary for your supplements. Go to line 35. Yes. State any amount that you must line 33, to keep possession of you 60 and fill in the information below the creditor. ONE- o you owe any priority claims such as re past due as of the filling date of your No. Go to line 36. | secured by your primary residence, a vehicle port or the support of your dependents? It pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividow. Identify property that secures the debt Total as a priority tax, child support, or alimony - the bankruptcy case? 11 U.S.C. § 507. | e, or listed in le by | amount ÷ | 60 = \$ Copy | Monthly cure amount |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main

Debtor 1 CARDENALES ROLON, JORGE LUIS Page 52 of 59

Case number (if known)

| For more | eligible to file a case under Chapter 13? 11 U.S.C. § 10 information, go online using the link fo <i>Bankruptcy Basic</i> ons for this form. <i>Bankruptcy Basics</i> may also be available | s specified i | | ice. | | | |
|---|---|-----------------|--------------------------|------------------|----------------|--------------|----------|
| ■ No. | Go to line 37. | | | | | | |
| ☐ Yes. | Fill in the following information. | | | | | | |
| Projected monthly plan payment if you were filing under Chapter 13 \$ | | | | | | | |
| | Current multiplier for your district as stated on the list iss Administrative Office of the United States Courts (for di and North Carolina) or by the Executive Office for United all other districts). | istricts in Ala | | | | | |
| | To find a list of district multipliers that includes your dist link specified in the separate instructions for this form. Tavailable at the bankruptcy clerk's office. | | | | Cor | oy total | |
| | Average monthly administrative expense if you were filing | ງ under Cha | pter 13 | \$ | | e=> \$ | |
| | of the deductions for debt payment. es 33e through 36. | | | | | \$ | 1,488.15 |
| Total Deduc | tions from Income | | | | | | |
| 38. Add all d | of the allowed deductions. | | | | | | |
| | ne 24, All of the expenses allowed under IRS e allowances | \$ | 3,092.56 | | | | |
| Copy lir | ne 32, All of the additional expense deductions | \$ | 0.00 | | | | |
| Copy lir | ne 37, All of the deductions for debt payment | +\$ | 1,488.15 | _ | | | |
| | Total deductions | \$ | 4,580.71 | Copy total | here | => \$ | 4,580.71 |
| Part 3: Det | termine Whether There is a Presumption of Abuse | | | _ | | | |
| 39. Calculat | e monthly disposable income for 60 months | | | | | | |
| | opy line 4, adjusted current monthly income | \$ | 2,327.67 | | | | |
| | opy line 38,Total deductions | - \$ | 4,580.71 | | | | |
| 332. 33 | | | 4,000.71 | \neg | | | |
| | onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a | \$ | 0.00 | Copy here=>\$ | | 0.00 | |
| For the | next 60 months (5 years) | | | | x 60 | | |
| | | | | |] | | |
| 39d. To | otal. Multiply line 39c by 60 | | \$ | 0.00 | Copy here=> | \$ | 0.00 |
| 40. Find out | whether there is a presumption of abuse. Check the b | oox that app | lies: | | J | | |
| ■ The | line 39d is less than \$7,700*. On the top of page 1 of this | s form, chec | k box 1, <i>There is</i> | s no presump | tion of abus | se. Go to Pa | ırt 5. |
| ☐ The I | line 39d is more than \$12,850*. On the top of page 1 of to claim special circumstances. Go to Part 5. | | | | | | |
| _ ` | line 39d is at least \$7,700*, but not more than \$12,850* | *. Go to line | 41 | | | | |
| | to adjustment on 4/01/19, and every 3 years after that for o | | | te of adjustme | ent. | | |
| Gabject | to adjustinont on montro, and every o years after that for t | AUGU IIIEU U | or artor trie ua | or aujustill | J. 11. | | |

Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 53 of 59

| | 41a. | Fill in the amount of your total nonpriority unsecured debt. If you filled ou Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. | | \$ | .25 | | | |
|---------------|--|---|------------------------------|----------------------------------|--------------------------------|-----------|----------------|-------------|
| | 41b. | 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(| | \$ | | | Copy here=> | \$ |
| of | your u | ne whether the income you have left over after subtracting all allowed decunsecured, nonpriority debt. e box that applies: | ductio | ns is e | nough (| to pay 2 | 5% | |
| | | 39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Ther</i> p Part 5. | e is no | presur | mption c | of abuse. | | |
| | | 39d is equal to or more than line 41b. On the top of page 1 of this form, chece. You may fill out Part 4 if you claim special circumstances. Then go to Part 5 | | 2, Ther | e is a pı | resumptio | on of | |
| 4. | ا | ve Details About Special Circumstances | | | | | | |
| 11 | GIV | e Details About Special Circumstances | | | | | | |
| o ye | u ou hav | ve any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B). | ents of | curre | nt mont | thly inco | ome for | which there |
| o yo | ou hav onable | e any special circumstances that justify additional expenses or adjustme | ents of | f curre | nt mont | thly inco | ome for | which there |
| Do yo easo | ou have brable to Go. Go. | ve any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B). | | | | | | |
| o yo easo | ou have consider the consideration of the considera | ve any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B). To to Part 5. I in the following information. All figures should reflect your average monthly expenses. | ense o xpense | r incom | e adjust | tment fo | r each it | |
| o yo easo | ou have brable do. Go. Go. Fill Yo nee adj | re any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B). In the following information. All figures should reflect your average monthly expert may include expenses you listed in line 25. The must give a detailed explanation of the special circumstances that make the excessary and reasonable. You must also give your case trustee documentation of | ense o xpense f your a | r incom es or inc actual e | e adjust come ad xpenses | tment for | r each it | |
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Date December 14, 2018 MM / DD / YYYY

Certificate Number: 15725-PR-CC-032029001



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 13, 2018</u>, at <u>1:27</u> o'clock <u>PM EST</u>, <u>Jorge Luis Cardenales Rolon</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>District of Puerto Rico</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 13, 2018

By: /s/Melissa James

Name: Melissa James

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapte | er 7: | Liquidation |
|--------|-------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:18-07283-BKT7 Doc#:1 Filed:12/14/18 Entered:12/14/18 12:09:32 Desc: Main Document Page 59 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Puerto Rico, San Juan Division

| In re | CARDENALES | ROLON, JORGE LUIS | | Case No. | | |
|---------|---|---|---|-------------------|---------------------|-------------------------------|
| | | | Debtor(s) | Chapter | 7 | |
| | DI | SCLOSURE OF CO | MPENSATION OF ATTOR | NEY FOR I | DEBTOR | |
| C | ompensation paid to | me within one year before | P. 2016(b), I certify that I am the attorne the filing of the petition in bankruptcy, or olation of or in connection with the bankr | r agreed to be pa | id to me, for servi | nd that ces rendered or to |
| | For legal service | es, I have agreed to accept | | \$ | 1,000.00 | |
| | | | ceived | | 1,000.00 | |
| | Balance Due | | | \$ | 0.00 | |
| 2. T | he source of the cor | mpensation paid to me was: | | | | |
| | Debtor | ☐ Other (specify): | | | | |
| 3. T | he source of compe | nsation to be paid to me is: | | | | |
| | Debtor | ☐ Other (specify): | | | | |
| 4. | I have not agreed firm. | to share the above-disclosed | d compensation with any other person un | nless they are me | mbers and associa | ates of my law |
| [| | | empensation with a person or persons who the names of the people sharing in the co | | | f my law firm. A |
| 5. I | n return for the abov | ve-disclosed fee, I have agree | ed to render legal service for all aspects of | of the bankruptcy | case, including: | |
| b c. | . Preparation and fi | ling of any petition, schedul the debtor at the meeting of | d rendering advice to the debtor in deterr es, statement of affairs and plan which m creditors and confirmation hearing, and | nay be required; | - | bankruptcy; |
| 6. B | y agreement with th | ne debtor(s), the above-discle | osed fee does not include the following se | ervice: | | |
| | | | CERTIFICATION | | | |
| | certify that the foreg inkruptcy proceedin | | nt of any agreement or arrangement for pa | ayment to me for | r representation of | f the debtor(s) in |
| De | ecember 14, 2018 | (| /s/ Roberto Figuero | a-Carrasquillo | | |
| Do | ite | | Roberto Figueroa-C | arrasquillo | | |
| | | | Signature of Attorney RFigueroa Carrasq u | uillo Law Offic | e PSC | |
| | | | PO Box 186 | | | |
| | | | Caguas, PR 00726-0 | | . | |
| | | | (787) 744-7699 Fax rfc@rfclawpr.com | : (/8/) 746-529 | 94 | |
| | | | Name of law firm | | | |